# HOME AND COMMUNITY BASED CARE WAIVERS: INDIVIDUAL AND FAMILY DEVELOPMENTAL DISABILITIES SUPPORT (IFDD) WAIVER

### DESCRIPTION

The DD Waiver serves individuals age six and older who, without waiver services would require placement in an ICF/MR Facility. Preadmission assessments are completed by Child Development Clinics through local Health Departments. DMAS contractor preauthorizes services.

DMAS staff conduct quality management reviews of waiver services. Level of care assessments and annual reassessments are provided by DMAS staff.

WAIVER INFORMATION <sup>1</sup>									
Service	Covered Services	Excluded Services	Pre-Screening and Authorization	Billing	Current Rates				
Skilled Nursing	Services of licensed nurses- RN and LPN- provided for individuals with serious medical conditions with complex health care needs that require specific skilled nursing services that cannot be provided by non-nursing personnel. May be provided in the home, or other community setting on a regularly scheduled or intermittent basis. To include consultation and training for other providers of services.	parents of the individuals who are minors,	Must be in the DD Waiver in order to access services. Authorization is provided by the preauthorization contractor. Medical care needs must require specific skilled nursing services ordered by a Physician.		NOVA RN: \$31.50/hour LPN: \$27.30/hour	ROS RN: \$25.94/hour LPN: \$22.52/hour			
Personal Care	Services of personal care aides who assist with the recipient's activities of daily living such as bathing, dressing, transferring, ambulating and meal preparation. Can be agency-directed or consumer-directed.	Transportation services. Skilled services requiring professional skills or invasive therapies. Services provided to other members of the household	Pre-Screening completed by a Preadmission Screening Team. Authorization is provided by the pre authorization contractor.	care aide rendered for the recipient.	Agency-directed: \$14.05/hour Consumer-directed: \$10.61/hour	Agency-directed: \$11.93/hour Consumer-directed: \$8.19/hour			
Respite Care	Reimbursement for personal care aides or LPNS' who perform respite care and skilled respite care and other activities for the relief of the caregiver. Services are limited to 720 hours per calendar year.	Transportation services. Skilled services requiring professional skills or invasive therapies. Services provided to other members of the household Recipient must live in the same household as the individual.	Prescreening completed by a preadmission screening team. Authorization of services by a preauthorization contractor.	received respite care.	Agency-directed: \$14.05/hour Consumer-directed: \$10.61/hour	Agency-directed: \$11.93/hour Consumer-directed: \$8.19/hour			
Companion Care	Provision of non medical care, socialization or support to an adult(18YO or older). Assistance with meals preparation, community access and activities, laundry, shopping and light housekeeping.	Limit of 8 hours per 24 hour day. Skilled services requiring professional skills or invasive therapies. Services provided to other members in the same household.	Must be in the DD Waiver in order to access services. Authorization is provided by the prior authorization contractor.	received companion care.	Agency-directed: \$14.05/hour Consumer-directed: \$10.61/hour	Agency-directed: \$11.93/hour Consumer-directed: \$8.19/hour			
Personal Emergency Response System (PERS)	An electronic device that enables certain recipients at high risk of institutionalization to secure help in an emergency through the provision of a two-way voice communication system that dials a 24-hour response or monitoring center upon activation and via the recipient's home telephone line.	A recipient cannot receive supervision hours on the plan of care.	Pre-Screening completed by a Preadmission Screening Team. Preauthorization began in 2002.	Reimbursements for a one-time installation and a monthly monitoring fee.	Installation: \$59.21/hour Monthly Monitoring: \$35.40/hour	Installation: \$50.18/hour Monthly Monitoring: \$30.00/hour			
PERS Medication Monitoring	An electronic device that enables certain recipients at high risk of institutionalization to be reminded to take their medications at the correct dosages and times.	A recipient cannot receive supervision hours on the plan of care.	Assessment is completed by a preadmission screening team. A recipient must have the PERS unit to qualify.		Installation: \$88.50/hour Monthly Monitoring: \$59.00/hour RN Services: \$15.00/hour LPN Services: \$13.00/hour	Installation: \$75.00/hour Monthly Monitoring: \$50.00/hour RN Services: \$12.25/hour LPN Services: \$10.25/hour			

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WAIVER INFORMATION, CONTINUED								
	Responsible for monitoring the ongoing provision of all	A recipient with a severe cognitive	Assessment completed by a	Services Facilitation is billed using	Comprehensive Visit:			
<b>Directed Services</b>	Consumer Directed services.	impairment, as defined by DMAS, must	preadmission screening team.	procedure codes to indicate the type	\$219.45	\$169.05		
Facilitation		have a primary caregiver manage his/her		of service provided.	D (1 ) (1 )			
		care and employee.	pre authorization contractor		Routine Visit:	<b>#50.50</b>		
					\$68.25	\$52.50		
					Reassessment Visit:			
					\$110.25	\$84.00		
					Consumer Training:			
					\$218.40	\$168.00		
					Management Training:	,		
					\$27.30	\$21.00		
						•		
					Criminal Record Check: S	\$15.00 each		
					CPS Registry: \$5.00 eac	h		
Crisis	Direct intervention to strengthen the current living	May only occur after an initial face to face	Must be in the DD Waiver to	Billing is for one hour in 15 day	Intervention: \$85.05	1		
Stabilization	situation and assist individuals to remain living in the	assessment by a qualified MR		increments but not to exceed 60 days				
	community. Services may include neuro- psychiatric,	professional. Extensions beyond the	to face assessment prior to	in a calendar year.				
	psychiatric, psychological, and other functional	allowable 15 days must be prior authorized						
	assessments and stabilization techniques.	and only following a documented face to	and performed by the PA					
	·	face reassessment by a qualified MR	contractor.					
		professional.						
0.1.1.	Oriais Companision manufacture 11.1	Must be see to see and force to force!	Months in the DD Web and	Dillian in bounds and the set	Companision (COC) 40			
Crisis	Crisis Supervision may be provided as a component of Crisis Stabilization services only if clinical or behavioral	Must be one to one and face to face by a qualified MR professional. Not for	Must be in the DD Waiver to	Billing is hourly service units.	Supervision: \$23.10			
Supervision	interventions allowed under this service are also	continuous long term care. Room and	access service. Must have a face to face assessment prior to					
	provided during the authorized period. Crisis	board are not a component of this service.	services. Preauthorization required					
	Supervision must be provided one-to-one and face-to-	board are not a component of this service.	and performed by the prior					
	face with the individual. It may be provided by the same		authorization contractor.					
	provider of Crisis Stabilization Clinical or Behavioral							
	services or a different provider.							
	·							
Supported	Supported Employment means work in settings in which	Service in combination with prevocational	Must be in the DD Waiver in order	Billing is for the number of hours for	Individual Placement: \$1	6.00		
Employment	persons without disabilities are typically employed. It is	and day support services is limited to 780	to access services. Authorization is	o .	individual Placement. \$1	0.00		
Employment	especially designed for individuals with developmental	units per plan year.	provided by the prior authorization	services rendered.	Enclave/Work Crew: \$34	13		
	disabilities facing severe impediments to employment	units per plan year.	contractor.		LIICIAVE/VVOIK CIEW. \$54	.10		
	due to the nature and complexity of their disabilities,		oonii dotoi.					
	irrespective of age or vocational potential. This service							
	may be authorized as individual placement, or enclave.							
	Services to prepare and individual for unpaid/ paid	Service in combination with Supported		Billing is for the number of units for	Regular Intensity: \$25.19	)		
Services	employment, but are not job task oriented. Provided for	Employment and Day Support services is	to access services. Authorization is	services rendered.				
	individuals who are not expected to join the general	limited to 780 units per plan year.	provided by the preauthorization		High Intensity: \$35.86	5		
	work force without support or participation in the		contractor.					
	transitional/ sheltered year of beginning of waiver							
	services. May be center or non center based care.							
Therapeutic	Therapeutic Consultation provides expertise, training,	Can not be billed solely for the purpose of	Must be in the DD Waiver in order	Billing is per hours for services				
Consultation	and technical assistance in specific specialty areas to	monitoring.	to access services. Authorization is		\$52.50/hour			
	assist family members, caregivers, and other service	Ĭ	provided by the prior authorization					
	providers in supporting the individual.		contractor.					

	ATION, CONTINUED				
In-Home	Residential support services -training and assistance or	Can't be used to provide respite for family	Must be in the DD Waiver in order	Billing is per hours for services	Individual: \$18.90
Residential	specialized supervision provided primarily in the	members.	to access services. Authorization is	rendered.	
Support	individual's home or a DMHMRSAS licensed home or		provided by the preauthorization		
	approved residence considered to be his/her home, to		contractor.		
	enable the individual to maintain health, developed				
	skills in activities or daily living and safety in the use of				
	community resources and adapting their behavior to				
	community and home environments.				
Day Support	Day Support services include training, assistance or	Can not be performed in an individuals	Must be in the DD Waiver in order	Billing is per unit for services	Regular Intensity, Center-Based: \$25.19
Day Support	specialized supervision for the acquisition, retention or		to access services. Authorization is		Regular Intensity, Non-Center-Based: \$25.19
	improvement in self-help, socialization and adaptive	approval. Transportation can not	provided by the prior authorization		<u></u>
		exceed 25% of the total hours billed per	contractor.		High Intensity, Center-Based: \$35.86
		day.			High Intensity, Non-Center-Based: \$35.86
	supervision provides staff presence for ongoing or				
	intermittent intervention to ensure an individual's health				
	and safety. This service may be authorized at regular				
	intensity or high intensity, either center based or non-				
	center based.				
Environmental	Reimbursement for physical adaptations to a house, or	Only pertains to the physical structure of	Must be in the DD Waiver in order	Billing is for one unit and for the	Limited to \$5,000 per calendar year per individual.
Modifications	place of residence, vehicle used by the individual and	the residence. Must receive one other	to access services. Authorization is	- C	
	the work place when it provides for direct medical or	waiver service in addition to Case	provided by the preauthorization		
	remedial benefit.	Management. Maximum limit of \$5000.00	contractor.		
		per plan year. Cannot be carried over from			
		plan to plan.			
Assistive	Assistive Technology is specialized medical equipment,	Must receive one other waiver service and	Must be in the DD Waiver in order	Billing is for one unit and for the	Limited to \$5,000 per calendar year per individual.
	and supplies, devices, controls,	may be provided in a residential or non	to access services. Authorization is		Limited to \$5,000 per calendar year per individual.
reciliology	and applies, devices, controls, and appliances, not available under the State Plan for	residential setting. Maximum	provided by the preauthorization	preautionzed determination	
		limitation is \$5000.00 per plan year and	contractor.		
	individuals to increase their abilities to perform activities	can not be carried over from plan to plan	contractor.		
	of daily living, or to perceive, control, or communicate	year. Can't be used for			
	with the environment in which they live, or which are	the convenience of the caregiver or as a			
	necessary to their proper functioning. Assistive	restraint.			
	technology devices are expected to be portable.				
Family/Care	Comingo and analysis of the control	Describe and for our trainable and Park	Must be in the DD Weimen's codes	Daimburgament in hilled have the set	DAA CO/L
	Services are provided by professionals who can train families and educate relatives to disabilities, community	Doesn't pay for non-trainable medical	Must be in the DD Waiver in order	Reimbursement is billed hourly and must be prior authorized. Families	\$44.63/hour
Training	integration, family dynamics, stress management,	supplies of transportation services.	to access services. Authorization is provided by the preauthorization	must be prior authorized. Families may receive up to 80 hours of	
	behavior intervention, and mental health of parent, other		contractor.	family/caregiver training per plan of	
	family members or primary caregiver.		CONTRACTOR.	, , , , , ,	
	ranniy members or primary caregiver.			care year.	
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### RECIPIENT AND PAYMENT DATA<sup>2</sup> 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 Skilled Nursing Number of Recipients 0 \$3,417 **Payments** \$0 \$48,193 \$96,654 \$37,099 \$2,021 \$32,218 Cost per Recipien \$0 \$1,709 \$24,097 \$18,550 \$404 Agency-Directed **Personal Care** Number of Recipients 27 30 13 36 41 Payments \$4,984 \$119,583 \$431,139 \$472,942 \$645,426 \$841,089 Cost per Recipient \$1,246 \$9,199 \$15,968 \$15,765 \$17,929 \$20,514 Consumer-Directed **Personal Care** Number of Recipients 33 127 170 166 200 \$0 \$3,013,709 **Payments** \$0 \$1,154,467 \$1,764,654 \$2,177,600 Cost per Recipient \$0 \$9,090 \$10,380 \$0 \$13,118 \$15,069 Agency-Directed **Respite Care** Number of Recipients 2 14 15 20 23 Payments \$956 \$11,914 \$18,980 \$39,969 \$38,041 \$52,391 Cost per Recipient \$478 \$1,986 \$1,356 \$2,665 \$1,902 \$2,278 Consumer-Directed Respite Care Number of Recipients 34 163 224 186 230 Payments \$0 \$481,191 \$552.552 \$632,607 \$868,512 \$0 Cost per Recipient \$0 \$2,467 \$0 \$2,952 \$3,401 \$3,776 Agency-Directed **Companion Care** Number of Recipients 0 3 Payments \$0 \$2.812 \$25.886 \$32,407 \$58.106 \$118.887 Cost per Recipient \$0 \$2.812 \$8.629 \$8.102 \$8.301 \$16.984 Consumer-Directed **Companion Care** Number of Recipients 0 0 0 0 9 **Payments** \$0 \$0 \$0 \$0 \$608 \$138,388 \$0 \$0 Cost per Recipient \$0 \$0 \$304 \$15,376 **PERS** Number of Recipients 9 18 29 27 27 **Payments** \$110 \$800 \$3,260 \$6,790 \$7,200 \$8,048 \$89 \$234 \$267 \$298 Cost per Recipien \$110 \$181 PERS Medication Monitoring Number of Recipients 0 0 3 0 0 \$0 \$875 \$820 \$0 \$0 **Payments** \$0 Cost per Recipient \$0 \$0 \$292 \$273 \$0 \$0 CD Services Facilitation Number of Recipients 0 0 141 168 246 303 **Payments** \$0 \$0 \$79,224 \$29,301 \$97,284 \$79,745 Cost per Recipien \$0 \$562 \$174 \$395 \$263 \$0 Crisis Stabilization<sup>3</sup> Number of Recipients 0 3 0 Payments \$0 \$1,722 \$30,819 \$5,365 \$0 \$2,041 Cost per Recipient \$0 \$1,722 \$10,273 \$1,341 \$0 \$2,041 Crisis Supervision<sup>3</sup> Number of Recipients 0 Payments \$0 \$0 \$0 \$58,014 \$0 \$8,316 Cost per Recipient \$0 \$0 \$0 \$14,504 \$0 \$8,316 Supported Employment Number of Recipients 0 Payments \$0 \$683 \$8,113 \$21,620 \$53,268 \$96,131 \$683 \$5,405 \$10,654 Cost per Recipient \$0 \$8,113 \$12,016

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## RECIPIENT AND PAYMENT DATA, CONTINUED

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Pre-Vocational Services <sup>3</sup>					N/A	N/A	N/A	N/A	N/A	N/A
Number of Recipients										
Payments										
Cost per Recipient										
Therapeutic Consultation										
Number of Recipients					3	9	24	23	31	29
Payments					\$350	\$4,300	\$20,005	\$12,300	\$13,975	\$12,344
Cost per Recipient					\$117	\$478	\$834	\$535	\$451	\$426
In-Home Residential Support										
Number of Recipients					6	33	82	106	124	138
Payments					\$14,364	\$315,873	\$876,645	\$1,311,265	\$1,894,497	\$2,394,809
Cost per Recipient					\$2,394	\$9,572	\$10,691	\$12,370	\$15,278	\$17,354
Day Support										
Number of Recipients					0	15	24	25	26	34
Payments					\$0	\$60,205	\$132,108	\$104,161	\$176,247	\$283,919
Cost per Recipient					\$0	\$4,014	\$5,505	\$4,166	\$6,779	\$8,351
Environmental Modifications										
Number of Recipients					0	27	41	31	42	44
Payments					\$0	\$107,285	\$136,922	\$116,518	\$179,905	\$184,278
Cost per Recipient					\$0	\$3,974	\$3,340	\$3,759	\$4,283	\$4,188
Assistive Technology										
Number of Recipients					0	44	52	43	71	70
Payments					\$0	\$124,929	\$133,955	\$96,194	\$164,705	\$165,297
Cost per Recipient					\$0	\$2,839	\$2,576	\$2,237	\$2,320	\$2,361
Family/Caregiver Training										
Number of Recipients					0	0	11	24	31	23
Payments					\$0	\$0	\$7,735	\$15,476	\$17,430	\$21,716
Cost per Recipient					\$0	\$0	\$703	\$645	\$562	\$944
TOTAL SERVICES										
Number of Unduplicated Recipients					14	124	241	270	338	388
Payments					\$20,764	\$753,523	\$3,589,517	\$4,737,002	\$6,193,998	\$8,291,641
Cost per Recipient					\$1,483	\$6,077	\$14,894	\$17,544	\$18,325	\$21,370

Notes:
(1) IFDDS Waiver Services Manual.
(2) Recipient and expenditures data sources include the CMS 372 Report series "Annual Report on Home and Community-Based Waivers", the DMAS CD Payroll database,
(3) Reliable expenditure data and unduplicated counts of recipients for this service are not available.

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